1. What do crackles auscultated during lung sound assessment signify?
   A. Left ventricular failure or decrease in left ventricular compliance
   B. Right ventricular failure or decrease in right ventricular compliance
   C. Mitral regurgitation secondary to an incompetent valve
   D. Aortic stenosis secondary to an incompetent valve

2. Your trauma patient is 4 days post fracture of the right femur and suddenly develops shortness of breath. The most likely cause is:
   A. Fat embolus
   B. Atelactasis
   C. Pleural effusion
   D. Pulmonary edema

3. Attempts to wean a 54-year-old female patient from mechanical ventilation have been unsuccessful. The physician decides to perform a tracheostomy and mechanically ventilate the patient via a #8 Shiley tracheostomy tube. Twenty-four hours later, weaning is tried again. The patient's vital signs include temperature, 102.2°F (39°C); heart rate, 110 beats/min; blood pressure, 146/92mm Hg; and respirations, 10 breaths/min. The patient is not assisting the ventilator. Which of the patient’s vital signs is the primary contraindication to weaning?
   A. Temperature
   B. Heart rate
   C. Blood pressure
   D. Respiratory rate, not assisting the ventilator

4. What is the MOST important nursing goal for a patient in septic shock?
   A. To promote adequate tissue perfusion and support oxygenation, ventilation, and hemodynamic stability
   B. To maintain accurate intake and output records and to optimize support
   C. To prevent skin and soft tissue breakdown
   D. To promote comfort and provide psychosocial support to the patient and family

5. A nurse should suspect tension pneumothorax in a mechanically ventilated patient if they observe:
   A. Increased heart rate and decreased blood pressure
   B. Ventilator high pressure alarms
   C. Distant right-sided breath sounds
   D. All of the above

6. A patient with pancreatitis has been transferred to the intensive care unit. Which order would the nurse anticipate?
   A. Blood pressure every 15 minutes
   B. Insertion of a Nasogastric tube
   C. Cardiac monitoring
   D. Dressing changes two times per day

7. The physician has ordered intubation and mechanical ventilation for a patient with periods of apnea following a closed head injury. Arterial blood gases reveal a pH of 7.47, PCO2 of 28, and HCO3 of 23. These findings indicate that the patient has:
   A. Respiratory acidosis
   B. Respiratory alkalosis
   C. Metabolic acidosis
   D. Metabolic alkalosis
8. A nurse caring for a patient with a closed head injury obtains an intracranial pressure (ICP) reading of 20 mmHg. The nurse recognizes that:
   A. The ICP is elevated and the physician should be notified
   B. The ICP is normal; therefore, no further action is needed
   C. The ICP is low and the patient needs additional IV fluids
   D. The ICP reading is not as reliable as the Glasgow coma scale

9. A nurse is checking a patient's central venous pressure. The nurse should place the zero of the manometer at the:
   A. Phlebostatic axis
   B. PMI
   C. Erb's point
   D. Tail of Spence

10. A nurse is reviewing the lab results of a patient's arterial blood gases. The PaCO2 indicates effective functioning of the:
    A. Kidneys
    B. Pancreas
    C. Lungs
    D. Liver

11. For a patient with cervical spine injury, the most important observation the nurse makes deals with which body system?
    A. Cardiovascular
    B. Respiratory
    C. Renal
    D. Gastrointestinal

12. Signs and symptoms of diabetic ketoacidosis include:
    A. Fruity breath, deep and rapid breathing
    B. Vomiting, hyperactivity, diaphoresis
    C. Slow and shallow breathing, pallor, headache
    D. Dilated pupils, coma, flushed skin

13. When feeding a patient using continuous tube feedings, the most important intervention in preventing aspiration is:
    A. Keeping the head of the bed elevated
    B. Doing frequent chest PT
    C. Checking the position of the feeding tube q4 hours
    D. Aspirating stomach contents q4 hours

14. Your patient is actively bleeding from the gastrointestinal tract and is receiving a blood transfusion. The patient has a sudden increase in body temperature. Your first response is to:
    A. Notify the physician
    B. Chart the finding
    C. Check for a rash
    D. Stop the transfusion
15. The liver usually metabolizes most drugs into compounds that are more easily excreted via the kidneys. Advancing age decreases both liver blood flow and levels of microsomal enzymes, which decreases metabolism, causing the drugs to accumulate to potentially high levels in the body. What laboratory values are used to monitor for hepatic function?

A. Albumin  
B. SGOT (AST) or SGPT (ALT)  
C. Total Bilirubin  
D. Total Protein

16. Acutely ill patients with diabetes mellitus generally require a/an:

A. Higher dose of insulin  
B. Restricted caloric intake  
C. Increase in fat intake  
D. Less insulin

17. Nursing activities for patients receiving gastric lavage to control acute gastrointestinal bleeding include all of the following EXCEPT:

A. Observation for abdominal distention  
B. Accurate intake and output  
C. Using distilled water for lavage  
D. Monitoring of hemoglobin and hematocrit

18. When caring for a patient where the nurse would be exposed to body fluids, it is important to observe which of the following?

A. Airborne precautions  
B. Reverse isolation  
C. Universal (standard) precautions  
D. Blood and urine isolation

19. Upon admission to the hospital following an explosion at his job, Mr. Clark says he has a durable power of attorney for health care. This document might state Mr. Clark’s desire to:

A. Use any technology that is available to prolong his life  
B. Appoint his wife to make health care decisions if he is unable  
C. Enter into any research that might help his condition  
D. Have his organs donated if resuscitation is unsuccessful

20. A severely burned patient is admitted to your unit. The most important treatment during the first 24 hours after injury is:

A. Wound cultures  
B. Antibiotic prophylaxis  
C. Pain relief measures  
D. Fluid replacement

21. An early sign of increased intracranial pressure generally involves changes in:

A. Response to pain  
B. Level of consciousness  
C. Equality of papillary reaction  
D. Respiratory rate
22. The major therapeutic goal in the treatment of cardiogenic shock is to:
   A. Increase after load
   B. Lower the BUN
   C. Increase cardiac output
   D. Decrease extracellular fluid volume

23. The following rhythm strip represents:

   ![Rhythm Strip Image]

   A. First degree heart block
   B. Bradycardia
   C. PEA
   D. Third degree heart block

24. The classical ECG change in an acute myocardial infarction (MI) is a/an:
   A. Inverted Q wave
   B. ST segment elevation
   C. Frequent PVCs
   D. Prolonged PR interval

25. A normal mean pulmonary artery pressure is:
   A. 12-16
   B. 20-25
   C. 26-30
   D. 31-35

26. A central venous pressure (CVP) reading directly reflects pressure in the:
   A. Left atrium
   B. Right atrium
   C. Left ventricle
   D. Pulmonary artery

27. Which of the following are now routinely recommended for patients with ischemic-type chest pain, unless allergies or contraindications exist?
   A. Oxygen mask or nasal cannula
   B. Nitroglycerin SL or IV
   C. Aspirin PO
   D. All of the above

28. The MOST likely reason for a deviated trachea in an accident victim with closed chest trauma is:
   A. Edema from a fractured clavicle
   B. A cervical dislocation
   C. Development of a tension pneumothorax
   D. The presence of bronchial hemorrhage
29. Mr. Gee has an endotracheal tube. During your rounds, you ask if his breathing is okay. In an audible tone he says, "Yes". You should first:
   A. Ask the patient to cough
   B. Suction the patient
   C. Notify the physician
   D. Check the functioning of the cuff

30. A 70 kg patient with a recent MI is in the CCU. He develops ventricular tachycardia and immediately loses consciousness. He has no pulse and is not breathing. Which of the following is the most appropriate intervention?
   A. Administer Epinephrine 1 mg IV bolus
   B. Administer Lidocaine 100 mg IV bolus
   C. Call for help and deliver a synchronized shock
   D. Call for help and deliver an unsynchronized shock

31. Skin preparation prior to EKG lead placement includes:
   A. Shaving away hair
   B. Cleansing with alcohol
   C. Rubbing with a 2 x 2 gauze
   D. All of the above

32. Sinus Tachycardia may be seen as a response to:
   A. Anxiety
   B. Pain
   C. Fever
   D. All of the above

33. Identify the following rhythm:

   ![ECG Image]

   A. First degree heart block
   B. Second degree heart block Type I (Wenckebach)
   C. Second degree heart block Type II
   D. Third degree heart block

34. Identify the following rhythm:

   ![ECG Image]

   A. Atrial flutter
   B. SVT
   C. V-tach
   D. Normal sinus rhythm
35. In a normal heart, the pacemaker is the:
   A. AV node
   B. Sinoatrial node
   C. Purkinje fibers
   D. Left bundle branch